Comprehensive Cancer Control

...An integrated and coordinated approach to reducing cancer incidence, morbidity, and mortality through prevention, early detection, treatment, rehabilitation, and palliation.

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Comprehensive cancer control (CCC) is an emerging model that integrates a range of activities to maximize the impact of limited resources and achieve desired cancer prevention and control outcomes.

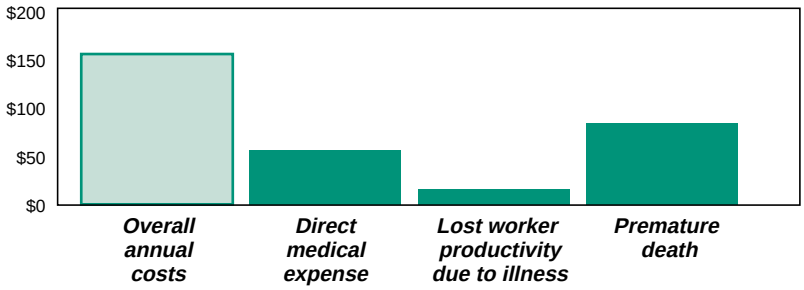
Cancer is the second leading cause of death in the United States. In 2002, 1,284,900 new cases of cancer will be diagnosed and more than 555,600 people—about 1,500 people a day—will die of the disease. The financial cost of cancer is also significant. According to the National Institutes of Health, in 2001 the overall annual costs for cancer were $156.7 billion: $56.4 billion for direct medical expense, $15.6 billion for lost worker productivity due to illness, and $84.7 billion due to premature death.

Comprehensive cancer control is based on the following principles:

- Scientific data and research are used systematically to identify priorities and inform decision making.
- The full scope of cancer care is addressed, ranging from primary prevention to early detection and treatment to end-of-life issues.
- Many stakeholders are engaged in cancer prevention and control, including not only the medical and public health communities, but also voluntary agencies, insurers, businesses, survivors, government, academia, and advocates.
- All cancer-related programs and activities are coordinated, thereby creating integrated activities and fostering leadership.
- The activities of many disciplines are integrated. Appropriate disciplines include administration, basic and applied research, evaluation, health education, program development, public policy, surveillance, clinical services, and health communications.

The Financial Cost of Cancer in 2001

(estimated billions)



Source: National Institutes of Health.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention

Timeline of Comprehensive Cancer Control Highlights

1994	1996	1997	1998	2001	2002
Centers for Disease Control and Prevention (CDC) advocates for a comprehensive approach to fighting cancer.	*Comprehensive Cancer Control (CCC) definition established.*	*CCC framework developed.* *Case studies from 6 states yield insights into essential elements needed to implement CCC programs.*	*Testing of CCC framework yields insights into data on building block model for CCC planning.* *5 states and 1 tribal organization are funded to implement CCC activities.*	*14 states are funded for CCC planning and implementation.*	*Guidance for CCC Planning — Vol. I (Guidelines) & II (Toolkit) released.*

A Coordinated Public Health Approach

The Centers for Disease Control and Prevention (CDC) has developed the building blocks model for CCC planning, a strategy for engaging and building a coordinated public health response. This model provides a way to assess and then address the cancer burden within a state, territory, or tribe. It builds on the achievements of, and enhances the infrastructure created for, cancer programs—many of which address individual cancer sites or risk factors. Comprehensive cancer control is achieved through a partnership of public and private stakeholders whose common mission is to reduce the overall burden of cancer. These stakeholders review epidemiologic data and research evidence (including program evaluation data) and then jointly set priorities for action. The partnership then mobilizes support for implementing these priorities and puts in place a systematic plan to institutionalize the comprehensive approach as a means to coordinate activities, monitor progress over time, and reassess priorities periodically in light of emerging developments in cancer and related fields.

CDC is working to define the elements that form the basis for monitoring and evaluating CCC implementation. CDC intends to study how planning and interventions may vary across programs and to define the most salient components needed to implement activities in a CCC plan. Such an understanding will allow CDC and other partners to provide technical assistance and guidance to national, state, territorial, and tribal partners for planning, implementation, and evaluation of their CCC activities.

This integrated and coordinated approach is expected to contribute to a reduction in cancer incidence, morbidity, and mortality.

National Leadership

To improve coordination, as well as to increase the impact of comprehensive cancer control at the federal, state, and community levels, CDC has partnered with the following national organizations:

- American Cancer Society
- American College of Surgeons
- Association of State and Territorial Health Officials
- Chronic Disease Directors
- Intercultural Cancer Council
- National Cancer Institute
- National Conference of State Legislatures
- National Dialogue on Cancer
- National Governors Association
- North American Association of Central Cancer Registries

Building National Partnerships

Working Together for Comprehensive Cancer Control: An Institute for State Leaders is a national collaborative summit convened by CDC, the American Cancer Society, the American College of Surgeons, the Intercultural Cancer Council, the National Cancer Institute, the National Dialogue on Cancer, and the North American Association of Central Cancer Registries. The Institute provides an opportunity for influential stakeholders to explore ways to implement a new or enhanced CCC program within their states. By Summer 2002, all states will have had an opportunity to participate in the Institute.

Examples from a Leadership Institute group activity, where stakeholder teams were asked to make the case for CCC, include the following:

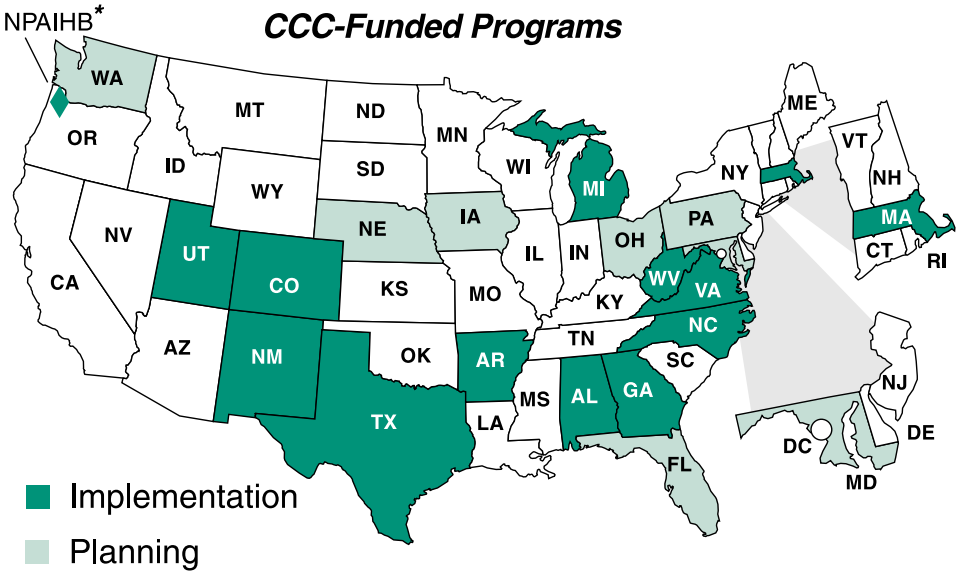
DELAWARE
As Delawareans, we have *all* been touched by cancer. *Together,* we have the power to reduce cancer impact on *ourselves, our families,* and *our communities.*

MONTANA
Driven by data, motivated by compassion: An investment in the future!

WASHINGTON
Cancer is the #1 health concern for most of our citizens: is it yours? Join other Washington leaders working together in the comprehensive cancer plan to develop a road map that will lead to a cancer-free future.

Comprehensive Cancer Control in Action

With fiscal year 2002 funds of $5.5 million, CDC's National Program supports planning and implementation in 19 states and one tribal organization. Public health agencies use this funding to establish broad-based coalitions, assess the burden of cancer, establish priorities for addressing the cancer burden, and develop and implement CCC plans. In addition, $3.4 million has been given in supplemental funding to support colorectal, prostate, and skin cancer activities within CCC programs.



* Northwest Portland Area Indian Health Board

CCC programs across the country are making significant progress in coordinating and integrating cancer prevention and control. Examples include the following:

Enhancing Infrastructure in Georgia

The Georgia Cancer Coalition, a public-private partnership, was created by Governor Roy Barnes in 2000. With support from tobacco settlement funds, federal grants, and private organizations, the coalition has funded nine rural cancer education and screening projects to develop partnerships to educate citizens and increase cancer screening in rural counties that have breast, cervical, colorectal, or prostate cancer mortality rates above the state average. The Coalition also funded eight projects to improve availability of mammography services for women living in counties that have no mammography facilities.

Assessing the Cancer Burden in Iowa

In 2001, legislation enacted in Iowa mandated the development of the CCC Study Committee. On the basis of the cancer data in *Healthy Iowans 2010*, the CCC Study Committee used the building blocks model to develop the following priorities:

- Assess the number of new cases and prevalence of cancer in Iowa.
- Evaluate the effectiveness of current cancer control efforts in terms of prevention, early detection, treatment, rehabilitation, and quality of life.
- Identify additional resources for breast and cervical cancer treatment.
- Evaluate the availability of cancer-related resources and their effectiveness.
- Focus on prostate, bladder, colorectal, skin, lung, oral cavity and pharynx, breast, and cervical cancers.

The findings of the CCC Study Committee were documented in the *CCC Report.* The *Report* identifies priorities for cancer prevention and control in Iowa and serves as the basis for Iowa's comprehensive cancer prevention and control plan.

Utilizing Data and Research in the Northwest Tribal Population

By linking the records of the Northwest Tribal Registry and the state cancer registries, the Northwest Portland Area Indian Health Board documented an underestimation of cancer incidence among its tribal members (153.5 per 100,000 population prior to linking compared with 267.5 per 100,000 after linking). This work underscores the importance of using high-quality data to assess the cancer burden and to eliminate health disparities.

Addressing the Cancer Burden in North Carolina

To address a priority area within the North Carolina CCC plan, the North Carolina Comprehensive Cancer Unit designed a pilot project to conduct colorectal cancer screening in 10 local health departments that service 15 counties throughout the state. The objective of this pilot project was to determine the feasibility of conducting colorectal cancer screening in local health departments. A total of 1,478 participants were counseled and offered fecal occult blood test kits; 706 (48%) completed and returned these kits. Ten precancerous polyps were found and four cancers were diagnosed. An evaluation of this project found local health departments could be useful in raising public awareness about the importance of early detection, as well as encouraging participation in screening programs. North Carolina plans to expand its colorectal cancer screening program as resources become available.

Building Partnerships for Cancer Control in Colorado

Colorado has enlisted the help of a large and varied group of partners both internal and external to the state health department to launch a public education campaign called "Sun Smart Tips." The goal of this campaign is to educate national park visitors about the need to protect themselves from the damaging rays of the sun and how best to prevent skin cancer. This campaign resulted from a unique partnership between national park officials and the state health department. Together, Colorado's Comprehensive Cancer Prevention and Control Program, the Mesa Verde National Park, and the park concessioner are educating Colorado residents and visitors from all over the world about the easy steps they can take to protect themselves from the damaging effects of sun exposure.

CDC's Future CCC Program Activities

- Expand national partnership activities.
- Engage in implementation research.
- Provide ongoing technical assistance.
- Expand the Leadership Institutes to address implementation challenges.
- Evaluate the impact of comprehensive cancer control.
- Expand the CCC program to include more states, territories, and tribes, as funding allows.

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